ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Bth	70385	
O.I.P.E. CLASSIFIER		8g	11-29-99
FORMALITY REVIEW	RS	61730	12-9

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected	
=	.... Allowed		I	.... Interference	
—	(Through numeral) Canceled		A	.... Appeal	
÷	.... Restricted		O	.... Objected	

Claim		Date		Claim		Date		Claim		Date
Final	Original	D/15/03		Final	Original			Final	Original	
1	✔				51				110	
2	✔				52				112	
3	✔				53				113	
4	✔				54				114	
5	✔				55				115	
6	✔				56				116	
7	✔				57				117	
8	✔				58				118	
9	✔				59				119	
10	✔				60				110	
11	✔				61				111	
12	✔				62				112	
13	✔				63				113	
14	✔				64				114	
15					65				115	
16					66				116	
17					67				117	
18					68				118	
19					69				119	
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43					93				143	
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45					95				145	
46					96				146	
47					97				147	
48					98				148	
49					99				149	
50					100				150	

If more than 150 claims or 10 actions
staple additional sheet here

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